## CAREGIVER MISCONDUCT REPORTING REQUIREMENTS WORKSHEET

The Bureau of Quality Assurance (BQA) established consistent requirements for regulated entities to conduct thorough internal investigations and report allegations of caregiver misconduct and injuries of unknown source. The worksheet is designed to assist you in determining if an incident must be reported to BQA. Completion of this worksheet is voluntary. **Refer to Chapter** 6 of The Wisconsin Caregiver Program Manual at <a href="http://dhfs.wisconsin.gov/caregiver/publications/CgvrProgMan.htm">http://dhfs.wisconsin.gov/caregiver/publications/CgvrProgMan.htm</a>.

**INCIDENT:** Possible caregiver misconduct allegations and injuries of unknown source are considered "incidents." Anyone who has information regarding an incident may report the incident to the entity. You can learn of an incident from:

- A verbal or written statement of a client or someone in a position to have knowledge of the incident through direct or indirect observation;
- Discovering an incident after it occurred;
- Hearing about an incident from others;
- Observing injuries (physical, emotional or mental) to a client;
- Observing misappropriation of a client's property;
- Or otherwise becoming aware of an incident.

**ACTION:** Upon learning of an incident, you must **immediately protect clients** from possible further incidents of misconduct or injury. In addition to BQA reporting requirements, entities are encouraged to **notify local law enforcement authorities** of any situation where there is a potential criminal offense.

ACTION: You must conduct a thorough internal investigation and document your findings for all incidents at the entity:

- Collect and preserve physical and documentary evidence;
- Interview victims and witnesses (persons with direct or indirect knowledge of the incident);
- Collect other corroborating/disproving evidence;
- Involve other regulatory authorities who can assist;
- Document each step taken during the internal investigation.

**ACTION:** Name an **accused individual**, if possible. If you are unable to name an accused individual, another regulatory authority or investigating agency (such as BQA or the police) may be able to identify an accused person.

- A caregiver is any person who is employed by or under contract with an entity; has regular, direct contact with the entity's clients or the personal property of the clients; and is under the entity's control.
- A nonclient resident is a person who is not a client of the entity but who resides at the entity and has regular, direct contact with entity clients.

NAME:

a	To you have <b>information or other evidence</b> to prove the incident happened or do you believe a regulatory uthority or investigating agency may be able to obtain evidence to prove that the incident occurred?	
	EVIDENCE:	
С	Oo you believe the incident meets the <b>HFS 13 definition</b> of abuse, neglect or misappropriation? Refer to Chapter 6 of The Wisconsin Caregiver Program Manual for the complete HFS 13 definitions of the following:	
	injury or death or substantially disregards a client's rights or a caregiver's obligations to a client; an act of sexual intercourse or sexual contact; the forcible administration of medication; a course of conduct by a caregiver done with the intent to harass, threaten, intimidate or frighten and which does or could be expected to do so.  Neglect – Substantial carelessness or negligence which disregards the facility policy or the client's care plan and causes or could be expected to cause pain, injury or death or substantially disregards a client's rights or a caregiver's obligations to a client.  Misappropriation – Taking or using a client's property (money, credit card, jewelry, phone, etc.); obtaining the	
	property of a client by deceiving the client; having possession of a client's money or checks; using a client's personal identifying information to obtain credit, money, services, etc.	

	YES	NO
3. Are you reasonably certain the incident does <u>not</u> meet the definition of caregiver misconduct (abuse, neglect or misappropriation) or the definition of an injury of unknown source? Does your investigation support that the incident is not caregiver misconduct or an injury of unknown source?	1150	NO
• <b>Injury of unknown source</b> - the source of the injury was not observed by any person or the source of the injury can not be explained by the resident; <u>and</u> , the injury is suspicious because of the extent of the injury or the location of the injury.		
If you do not believe there is evidence to show the incident actually occurred, <b>or</b> if you do not believe that the incident meets the definitions of misconduct, then you must determine if you have evidence (documentation, nurse's notes, witnesses, etc.) to show that you can <u>rule out</u> the incident as caregiver misconduct or an injury of unknown source. For example, the discovery of a large bruise on a resident's arm can be traced back to documentation that the resident bumped into the wall when self-ambulating. <b>EXPLANATION:</b>		
ACTION: If you answered NO to question 3, please proceed to question 4.		
If you answered <b>YES</b> to question 3, you are <u>not required to report</u> the incident to BQA. Document your investigation and maintain on file the results of the <b>30</b> most recent internal investigations.		
<ol> <li>Is the alleged incident or the effect(s) of the incident on the client minor?</li> <li>EFFECT ON CLIENT:</li> </ol>		
A minor effect on the client is one that causes no apparent physical, emotional, mental pain or suffering or property/financial loss to a client. Examples include:  •Taking a piece of a client's candy;  •Food missing from a client's plate after the client has finished eating;  •Mild profanities not directed at a client.		
<ul> <li>The following examples are <u>not</u> considered minor effects on the client:</li> <li>Discomfort occurring as a result of a skin tear due to rough handling;</li> <li>Client cowering or crying due to verbal or physical threats;</li> <li>The taking of a client's spending money, even though the amount was small.</li> </ul>		
ACTION: If you answered NO to question 4, you <u>must</u> submit an Incident Report (DDE-2447) to BQA.		
If you answered <b>YES</b> to question 4, you are <u>not required to report</u> the incident to BQA. Document your investigation and maintain on file the results of the <b>30</b> most recent internal investigations.		

Follow these steps to report an incident of caregiver misconduct or an injury of unknown source to BQA:

Complete the Incident Report form (DDE-2447) and attach all relevant internal investigation documents.

Ensure the completed Incident Report is submitted according to the appropriate timeframe:

- Nursing homes and intermediate care facilities for persons with mental retardation (ICFs/MR) must submit reports of alleged caregiver misconduct to BQA/OCQ within five (5) working days of the incident or the date the entity became aware of the incident.
- All other entities must submit reports of alleged caregiver misconduct to BQA/OCQ within seven (7) calendar days of the incident or the date the entity knew of the incident.

Submit the completed Incident Report to:

Bureau of Quality Assurance Office of Caregiver Quality 2917 International Lane, Suite 300 Madison, WI 53704

BQA/OCQ will forward reports involving credentialed staff (Doctors, RNs, LPNs, Social Workers, etc.) to the Department of Regulation & Licensing (DRL).

## **Questions?**